

**REASSESSMENT OF STATE COURT PERFORMANCE IN
CHILDREN IN NEED OF PROTECTION OR SERVICES CASES**

Court Observation Form

General Information

- | | |
|--|--|
| 1. Court Observer's Name _____ | 6. Case No. _____ |
| 2. Date of Observation __/__/__ | 7. Type of Case: |
| 3. County _____ | <input type="checkbox"/> CHIPS (JC) |
| 4. Scheduled Start Time: __:__ <input type="checkbox"/> AM <input type="checkbox"/> PM | <input type="checkbox"/> TPR (TP) |
| 5. Actual Start Time: __:__ <input type="checkbox"/> AM <input type="checkbox"/> PM | <input type="checkbox"/> ADOPTION (AD) |

8. For each category of person attending the court proceeding, check the **Present** box. If that category of person has an attorney present, check the **Attorney Present** box.

Present

- | | |
|--|---|
| <input type="checkbox"/> Judge | (Name) _____ |
| <input type="checkbox"/> Court Commissioner | (Name) _____ |
| <input type="checkbox"/> District Attorney | |
| <input type="checkbox"/> Corporation Counsel | |
| <input type="checkbox"/> Adversary Counsel for Child | If not present, was written statement presented? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Guardian Ad Litem | If not present, was written statement presented? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Child | Number of JC/TP/AD cases heard: _____ |
| <input type="checkbox"/> Social/Case Worker | |

Present

- | |
|---|
| <input type="checkbox"/> Guardian/Legal Custodian |
| <input type="checkbox"/> Biological Mother |
| <input type="checkbox"/> Biological Father |
| <input type="checkbox"/> Foster Parent |
| <input type="checkbox"/> Pre-adoptive Mother |
| <input type="checkbox"/> Pre-adoptive Father |
| <input type="checkbox"/> Tribal Representative |
| <input type="checkbox"/> Other |

Attorney Present

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Is attorney court appointed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| <input type="checkbox"/> | Is attorney court appointed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| <input type="checkbox"/> | If not present, was written statement presented?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| <input type="checkbox"/> | |
| <input type="checkbox"/> | |
| <input type="checkbox"/> | |
| <input type="checkbox"/> | Specify: _____ |

9. Type of Hearing. Check the box(es) which best describes the hearing type.

Pre-Disposition

- | | |
|---|--|
| <input type="checkbox"/> Temporary Physical Custody | (Also called Detention Hearing or Emergency Custody) |
| <input type="checkbox"/> Initial Appearance | (Also known as Plea Hearing) |
| <input type="checkbox"/> Pre-trial | |
| <input type="checkbox"/> Fact Finding/Fact Trial | If yes, was it a court trial <input type="checkbox"/> or a jury trial <input type="checkbox"/> |
| <input type="checkbox"/> Disposition | |

Post-Disposition

- | |
|--|
| <input type="checkbox"/> Permanency Plan Hearing |
| <input type="checkbox"/> Extension |
| <input type="checkbox"/> Change of Placement |
| <input type="checkbox"/> Revision |

Miscellaneous

- | | |
|---|-------------|
| <input type="checkbox"/> Review/Status | Type: _____ |
| <input type="checkbox"/> Motion | Type: _____ |
| <input type="checkbox"/> Other/Not Sure, Notes: _____ | |

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Observations of Court Proceedings

10.	Did the Judge/Commissioner allow/request comments from any of the following present at the proceeding?	Did any of the following parties present witnesses?	Did any of the following parties present expert testimony?
District Attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corporation Counsel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adversary Counsel for the child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guardian Ad Litem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social/Case Worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guardian/Legal Custodian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother's Attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father's Attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foster Parent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-adoptive Mother	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-adoptive Father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tribal Representative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Witnesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Specify: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No	N/A	Unknown
11. Was the District Attorney/Corporation Counsel allowed sufficient time to complete his/her argument?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Was the mother's attorney allowed sufficient time to complete his/her argument?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Was the father's attorney allowed sufficient time to complete his/her argument?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Was the Guardian Ad Litem allowed sufficient time to complete his/her argument?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Was the Adversary Counsel for the child allowed sufficient time to complete his/her argument?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Was the Indian Child Welfare Act (ICWA) raised?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Were Termination of Parental Rights (TPR) warnings given?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No	Detailed/ Child Specific	N/A	Unknown
19. Were reasonable efforts made to prevent child removal from the home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Were reasonable efforts made to achieve the goals of the permanency plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Was finding made that it is contrary to the child's welfare to continue in parents home made?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Were reasonable efforts made to return the child safely home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Impressions of Court Proceedings

23. Rate the overall quality of the District Attorney/Corporation Counsel for each factor listed below.							
	Very Good	Good	Satisfactory	Fair	Poor	N/A	
a. Preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ability to respond to the judge's questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Rate the overall quality of the mother's attorney for each factor listed below.							
	Very Good	Good	Satisfactory	Fair	Poor	N/A	
a. Preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ability to respond to the judge's questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Rate the overall quality of the father's attorney for each factor listed below.							
	Very Good	Good	Satisfactory	Fair	Poor	N/A	
a. Preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ability to respond to the judge's questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Rate the overall quality of the Guardian Ad Litem for each factor listed below.							
	Very Good	Good	Satisfactory	Fair	Poor	N/A	
a. Preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ability to respond to the judge's questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Rate the overall quality of the Adversary Counsel for the child for each factor listed below.							
	Very Good	Good	Satisfactory	Fair	Poor	N/A	
a. Preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ability to respond to the judge's questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Rate the overall quality of the Judge/Court Commissioner for each factor listed below.							
	Very Good	Good	Satisfactory	Fair	Poor	N/A	
a. Preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ability to ensure parties are informed and sufficiently understand the activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Allowing parties sufficient time to present evidence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Allowing foster parent an opportunity to be heard or accounting for their written statement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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	Yes	No	N/A
29. Was sufficient time allotted for this proceeding?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Did the court make a decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Was further information requested prior to making a decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, specify: _____			
32. What was the court's decision? _____			
33. Was another hearing scheduled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, date: __/__/__ type: _____ If this is the same type of hearing, what is the reason for the continuance? _____			
34. Time of completion: __:__ <input type="checkbox"/> AM <input type="checkbox"/> PM			
35. Additional Comments:			

